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THESES AT THE PARISIAN CONCOURS.

[See page 58.]

THESIS OF M. VELPEAU.

ON THE OPERATION OF TREPANNING IN WOUNDS OF THE HEAD.

THIS is by far the most voluminous of the theses to which the present concours has given birth. Indeed, few men but M. Velpeau could have collected in the short space of eight days the immense quantity of matter which is contained in the 270 octavo pages composing his thesis. At each moment we find quotations (page and volume given), the whole selected from the most celebrated writers of every nation; and if professional learning alone were to bear the palm, we should have no hesitation in according it to the author. Unhappily, however, he seems to have lost himself in the extent of his researches; and the thesis, though superior in many points, is deficient in the very essential one of clearness. The reader is confounded by a multitude of conflicting operations, and finds himself at last in the predicament of the Athenian sage, whose learning led to the very unsatisfactory conclusion "that he knew nothing."

The thesis is divided into four parts. The first is historic. In the second the author exposes at length the principles by which the surgeon should be guided in the application of the trepan. The third part contains an examination of the doctrines delivered up to the present day on the same subject by the best writers. The fourth part treats of the consequences of the operation. We commence our analysis :—

Wounds of the head sometimes require the use of the trepan, not exclusively on their own account, but rather from the accidents attending them. M. Velpeau, therefore, commences by passing in review the different complications and consequences of wounds involving the soft or hard parts of the skull. It is impossible for us to follow the variety of details into which the author enters. We must content ourselves (though at the risk of being a little obscure) with endeavoring to arrive at his conclusions. In simple cases of wounds of the head, no surgeon thinks of trepanning; but in many cases the injury extends to the dura mater, the bone mortifies, and fluid is effused between the skull and dura mater; here is the first indication for the trepan established by the author, who maintains that necrosis of the two tables requires trepanning, whether there be symptoms of compression or not, and quotes three cases from his own practice where the patients died in consequence of his having neglected to operate.

Fractures.—M. Velpeau examines each species of fracture separately.

1st. *Of the External Table.*—These do not require the trepan (Astley Cooper), unless symptoms of suppuration of the bone or necrosis set in.

2nd. *Of the Internal Table.*—Though long debated, this fracture seems now established (Samuel Cooper). Whenever the symptoms are such as to give rise to the idea of a foreign body irritating the membranes, brain, &c., this fracture may be suspected, and the trepan applied to the injured point, although the external table is sound.

3rd. *Fissures.*—Simple fissure does not require the trepan; we should wait for symptoms of effusion; &c.; but when the fissure is large, blood is almost always effused between the bone and dura mater. In the latter case many surgeons reject the trepan, saying the fracture is sufficient for the discharge of the fluid; others endeavor to enlarge the fissure. M. Velpeau prefers the trepan, when the blood is not freely discharged, and disapproves of all artificial separation.

4th. *Radiated Fracture.*—Sometimes this fracture is confined to a single bone; sometimes it extends to several, radiating from the top to the base of the skull; here the commotion and contusion of the brain are great, the effusion is disseminated; the surgeon does not know where to apply the trepan; however, a few applications may be risked, if he have reason to suspect a more considerable collection at one point than at another.

5th. *Depressions. Without Fracture.*—This accident, though formerly admitted by all surgeons, is now considered impossible in the adult. It cannot be produced on the dead body, and in the cases published there is no proof that fracture did not exist at the same time.—*With Fracture.* In these cases the application of the trepan is the general rule. The cases in which trepanning may be dispensed with are the exceptions.

6th. *Fractures from Gunshot Wounds.*—The trepan is often indicated in these wounds, on account of the nature of the accident. Injuries by a pointed weapon, as a sword, &c. do not require an operation by themselves; when symptoms of effusion, &c. come on, it is time enough to apply the instrument.

7th. *Foreign Bodies: Solids.*—In wounds of the head various foreign bodies may indicate the necessity of applying the trepan, as splinters of a fractured bone, fragments of a necrosed bone, shot, balls, whenever they have not penetrated far beyond the wound, fragments of instruments, &c. In all these cases the use of the trepan is established without controversy.—*Liquids.* It may be laid down as a general proposition, that every effusion of any extent into the cavity of the skull requires the operation of the trepan. M. Velpeau examines the propriety of attacking by this means every variety of effusion—viz. of blood, between the dura mater and bone, into the serous cavity, into the substance of the brain, of pus in the same situations. As to the propriety of trepanning in cases where the blood is effused into the cavity of the arachnoid, Sir A. Cooper, Mr. S. Cooper, Abernethy, &c. reject the operation almost absolutely. M. Velpeau does not go so far. Whenever there are severe symptoms of compression he would trepan.

When effusion takes place in the substance of the brain, the wound is almost necessarily mortal ; however, the author thinks the trepan may be tried as a last resource, and quotes the case (from his own observation) of a young Englishman who shot himself in the temple with a pistol ; the ball came out near the sagittal suture on the same side, having traversed the whole of the cerebral lobe ; the hemorrhage was abundant, but death did not take place at once ; suppuration had time to be established ; the medullary substance presented itself at the openings, and considerable portions were removed ; finally, the patient was on the point of being cured, and would have certainly recovered, had it not been for the greatest imprudence on his part.

In the third chapter the author studies the propriety of the trepan in a pathological view—that is, according as there exist symptoms of compression, contusion, commotion, and inflammation.

M. Velpeau considers that foreign bodies, whether solid or liquid, act on the brain, not directly, but by the medium of another power, viz. the resistance of the osseous covering of the brain ; and hence trepanation has for its object, in cases of compression, not only the discharge of the foreign compressing substance, but also the destruction of the means by which compression is effected, viz. the resistance of the skull. This has been proved satisfactorily by the experiments of Fleurens. Hence, as a general thesis, the trepan is the best remedy against compression, whatever be its cause, degree, &c. This, however, does not establish the necessity of trepanning in all cases of compression, and the author satisfactorily explains how numerous cases may be cured without the trepan, when the symptoms are but transitory, the brain little injured, &c.

Contusion of the brain evidently requires the trepan, for the disorganized parts must suppurate and be discharged.

Concussion.—Here the trepan is never applicable, and M. Velpeau, following the advice of Abernethy, absolutely rejects it.

Inflammation.—When the traumatic inflammation is fully established and diffused, the trepan is not to be thought of ; but when inflammation is only threatening, or circumscribed, the operation should not be absolutely rejected. The patient, trepanned by Dease and Schmucker, recovered, although affected with meningitis ; and in going over the observations contained in authors, it is easy to see that wounds of the head, with an opening into the skull, are accompanied by less severe inflammatory symptoms than other wounds, and that the inflammation is less in proportion to the loss of cerebral substance. The twenty-two patients described by Paroisse (*Ob. de Chir.* 1806) had wounds of this kind ; they were all obliged to march above thirty leagues, without observing any regimen, yet twelve recovered.

After having quoted a variety of examples from Tulpus, Scutte, Schenk, Muys, Hoffman, Jeubeler, De Guise, &c. to prove this proposition, M. Velpeau explains it by the circumstance of the opening, which prevents any chance of compression, and this determines any inflammatory action to a circumscribed spot. Hence, without giving a fixed opinion, he thinks that the operation of the trepan should take rank amongst the remedies employed against inflammation of the brain following wounds of the head ; at least it is a new question to examine ;

and does not seem more frightful or irrational than the extensive incisions made to combat diffuse phlegmon of the extremities.

Secondary Accidents.—A patient may be perfectly well cured of his wound, yet after a variable number of months or years, experience symptoms sufficiently grave to require the trepan; such as convulsions, tetanic affections, epilepsy, &c. These are generally produced by a splinter of bone, necrosis, separation of the dura mater, &c. The trepan should be applied if nothing exist to account for the symptoms, except the old wound, if the cicatrix be sensible, if there be œdema under it, or crepitation.

Having thus described the different lesions which may indicate trepanation, the author proceeds to study the symptoms of those lesions, which he reduces to irritation, compression, contusion, concussion, and inflammation. In chapter the fourth, the symptoms of each affection are described at length. Contusion of the brain, says M. Velpeau, is marked by a dull, deep pain, accompanied by numbness, pulsation at the corresponding side of the skull, a sensation of weight, cold, and pressure, about the wounded place. Whether these symptoms be accompanied by paralysis, convulsion, fever, or not, they indicate the existence of contusion, and the trepan should be applied. Where this operation has not been performed, nearly all the patients so affected have died. Chapter five contains an examination of the opinion laid down by several surgeons, that the trepan should never be applied, 1st. Over the sutures; 2nd. The sinuses; 3rd. The temples; 4th. Over the passage of the middle meningeal artery; 5th. Over the occipital protuberance, &c.; 6th. Or when the effusion is at the base of the skull.

1. *Trepanning over Sutures.*—This question is now resolved by experience. No surgeon hesitates to trepan over the sutures if necessary. Guillemeau found himself obliged to do so in 1591 (*Œuvres Chir.* p. 659). Lusitanus applied the trepan over the sutures (*Portal*, t. i. p. 500). Finally, Thiriot, Morand, Wauner, and Hoffman, have followed the same practice. For each of these opinions, M. Velpeau quotes page and volume.

2nd. *Over Sinuses.*—There is no good reason for not trepanning over the sinuses. The least compression is sufficient to arrest the hemorrhage; besides, it is easy to trepan over them, without wounding the cavity. Janson has done so to extract a ball. (*Compte rendu de l'Hôtel Dieu de Lyons*, 1822, p. 47.)

3. *Over the Temples, &c.*—M. Velpeau quotes an immense variety of cases to prove that the trepan may be applied over the temples without any danger or inconvenience. The same remark applies to the danger of wounding the middle meningeal artery; hemorrhage from this vessel is rarely abundant; besides, it is easily arrested. Beclard and Dubois found no difficulty in stopping it. (*Arch. Gén. de Méd.* t. 3. p. 377.) In two cases M. Larrey cauterized successfully with a stilet. (*Clin. Chir.*, t. i. p. 180.)

The trepan may also be applied, with proper precaution, over the occipital protuberance, and there is no point of the skull, except the base, where the use of the instrument is contra-indicated.

The third part is the most interesting portion of the thesis; and had

the author possessed sufficient time to digest and arrange the quantity of matter he had collected, it would have formed a complete basis on which to form a definitive judgment. He examines successively the opinions of the most celebrated surgeons in England, Germany, and France, and endeavors to confirm, by an assemblage of facts, drawn from their practice, the principles laid down by him in the second part of the thesis. This is a monument of labor and learning, and deserves to be consulted by every surgeon.

Dease, like Desault, was an antagonist of the trepan. M. Velpeau analyses the twenty-five observations contained in his work, shows the reasons by which Dease was induced to reject the operation in many cases, and explains the causes of his ill success.

Twelve were cases of contused wounds without fracture ; nine died. M. Velpeau shows that all these had an inflammation either of the brain or membranes at the time of the operation, and not one had effusion of fluid ; in a word, the operation was by no means indicated. The second series of cases in Dease comprises eleven wounds of the head with fracture ; eight cases were trepanned and three died. And here, again, the operation was unnecessary in the majority of the cases, as eight were merely fracture of the external table.

The work of Pott, the great English advocate for the trepan, is analyzed with more care. M. Velpeau gives a concise account of twenty-eight cases detailed in that author, and shows what were the principles which guided him in the employment of the trepan. In these twenty-eight cases Pott only lost thirteen, and M. Velpeau points out how little influence the operation had in producing the deaths.

In spite of the sage reasoning of Pott, the doctrine of Dease prevailed in England, and was more or less adopted by Abernethy, J. Bell, Sir A. Cooper, &c. Abernethy rejected the trepan in cases of fracture with slight depression, and cited observations of this kind where the accidents supervening were few or none. In answer to this doctrine, M. Velpeau remarks that the observations of Abernethy are very incompletely given ; for he rarely ever mentions the depth of the depression, and refutes the objection of the danger of inflammation being produced by the trepan.

The opinions of J. Bell and A. Cooper are also submitted to a patient examination by the author. When the fracture is compound, and inflammation comes on, death (says Sir A. Cooper) is a necessary consequence, whether we trepan or not. If there be a wound with depression of the bone, it is better to elevate the fragments than apply any instrument. Sir A. Cooper says he has often met with depressions of the external table, the internal one being uninjured. He forbids dividing the dura mater if the surgeon do not find the blood between that membrane and the skull, and, finally, almost restricts the trepan to cases of compression where evacuations have failed.

We have been insensibly led to enter into a more detailed examination of the present thesis than we intended ; we must, therefore, hasten to the conclusions of the author. Having analyzed the opinions of the English surgeons, M. Velpeau turns to Germany, and gives the ideas professed by Klein, Eicheimer, Chelius, Zang, Beck, Behr, Steigmann, and Kleinert, favorers of the trepan, compared with the opposite doc-

trines of Graefe, Lowenhardt, Speyer, Schneider, Gadermann, Jæger, and Kern.

In France the doctrines of Desault, Giraud, and Larrey, are noticed, and the arguments of Marchand, Matter, Gama, &c. against the trepan, are answered.

It is unnecessary to mention, that during this long analysis of so many works, M. Velpeau endeavors to bring together the points which refer to his question, signalizes the true indications of operation, and distinguishes those cases where the instrument was rashly applied. Finally, the thesis is abundantly rich in observation, both original and quoted. We find no less than ninety-two cases of wounds in which the trepan had been applied, and which are given with all the necessary details.

The conclusions to which M. Velpeau comes are the following :—

Indications for the Trepan.

1. In wounds of the head with contusion of the bone, and detachment of the pericranium and dura mater.
2. Necrosis of the thickness of the bone.
3. Simple fractures, if accompanied by violent contusion, or effusion on the dura mater.
4. Fractures, with splinters of bone, when there is not a considerable space between the fragments.
5. Fracture with depression, unless there be no symptom of compression.
6. In cases of foreign bodies where they are not too deeply fixed.
7. In effusion, whatever be its nature or seat.
8. In all cases of compression, sufficient to trouble the cerebral functions.
9. In contusion of the brain, with symptoms of suppuration or paralysis.
10. In some cases of fixed pain, &c. under a point of the skull anciently wounded.
11. For convulsions or epileptic accidents depending on the same cause.
12. For the removal of fungous tumors, &c. which are developed on the dura mater after wounds of the head.

Contra-Indications.

1. When the contusion of the bone is slight and simple.
2. In fracture of the base of the skull, or if the injury extend there.
3. In simple uncomplicated fracture.
4. When the foreign body is lost in the brain.
5. When the effusion of blood or pus is diffused.
6. When the compression does not produce paralysis, and depends on a cause acting suddenly with its utmost energy.
7. In cases of concussion.
8. When there is general inflammation of the brain.

DISEASES OF THE TEETH.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Among the benefits we derive from the evils we suffer, it is not the least that we learn to feel for others. The misery I have experienced myself from defective teeth, prompts me now to comply with your invitation, expressed in the *Journal* of the 6th of last January, and to send you a few general remarks on the nature of the diseases of the teeth, and on the means to preserve them after becoming painful. If you find nothing new in this communication, it may be at least not unpleasing to you to have your opinion upon this subject confirmed by one, who reprobates as much as yourself the extraction of defective teeth as soon as they become painful, and the destruction of organs so useful for preparing our food for digestion, so necessary for the articulation of our language, for the formation of the symmetry of the human countenance, and conducive to our sense of hearing.

If we examine the symptoms, and inquire into the causes of toothache, we shall in most cases discover that this disease, like any other, is either idiopathic or sympathetic, and its character dyspeptic or inflammatory. It is one of the most troublesome and painful plagues to which the inhabitants of the temperate zones are subject ; it appears in some families to be hereditary ; it varies in degree, lessens and increases often periodically, observes at times the type of an intermittent fever, and alternates with other pains, or other diseases. If it be violent, lasting, and in tender irritable subjects, it produces sleeplessness, fever, faintness, convulsions, delirium, gastric affections, abscesses, ulcers, &c. ; and if symptomatic and connected with malignant fevers, or an exulceration of the lungs, it hastens death.

That there exists in some individuals a greater predisposition to this disease than in others, is manifest enough, as many remain free from it, though equally exposed. It appears that the idiopathic toothache affects frequently those who are habituated to take too hot or too cold, very sour or very sweet, victuals and drinks, and neglect keeping their mouths clean. This habit injures the enamel of a tooth, makes it thinner and more friable, produces at first a small black spot on it, and gradually carious hollows on its top or sides, and the nerve becomes exposed and irritated by the air, temperature, moisture, food and drink, and liable to be affected by internal causes. When the tooth has no external hollow, we may know from its pearly color, its gnawing obstinate pain, its fetid smell, and the little purulent orifices of the gums, that its inside is rotten. This happens when the gums are scorbutic, have a venereal or mercurial taint, or have been inflamed from some cause or other. Difficult dentition may be placed among the species of idiopathic toothache, though in most cases it appears only in feeble diseased children, and signs of constitutional disturbance, besides those of local irritation, are sufficiently evident. After all, I have no reason to doubt that idiopathic diseases often produce sympathetic ones, and the latter, reacting, aggravate the original complaint, either by the consensus nervorum, or by metastasis. It is therefore impossible to determine, in every instance, whether the

toothache be independent of any other affection, or the effect of another disease.

Of the sympathetic toothache there are a great number of species, which derive their names from the various diseases with which they are connected; and I think it useful for the practitioner to remember the principal species recorded by practical physicians, and which are marked with the following names: odontalgia inflammatoria, catarrhalis, gravidarum, hysterica, intermittens, rheumatica, verminosa, scorbutica, mercurialis, metastatica, venerea. Taking it for granted that most of your readers are acquainted with the symptoms, causes and treatment of all these diseases, I do not intend to enter into particulars, but shall confine myself to some general remarks.

If I were asked by a young physician to point out to him the most important and most useful general principle in the practice of physic, I should answer, without hesitation: endeavor in every case that comes before you, to ascertain whether an inflammatory diathesis or a dyspeptic and gastric affection prevails, particularly in the first stages. But this is not always an easy task, as it frequently happens that neither of these states exists entirely pure and unalloyed by the other; that the pulse, if not examined at different times of the day, may mislead, and, compared with other symptoms, entirely confound you. The most experienced physician, if not very attentive, will discover at times, and that too late, that a latent inflammation in a malignant fever destroyed his patient, or a great colluvies of putrid matter in primis viis. Experience, extensive medical knowledge, thorough examination, will do much towards discovering these enemies of life, and the general prevailing constitution of the diseases of the year and season will often throw great light upon the most obscure cases. The necessity which compels a physician, under particular circumstances and in rare cases, to administer tonics, stimulants, narcotics, &c. in the very first stages, alone or in combination with means dictated by the above principle, cannot destroy a precept so useful and beneficial in general practice, and in the vast majority of cases.

I am of opinion, that every well-educated and experienced physician will agree with me in the propriety of basing the treatment of the various idiopathic and sympathetic species of toothache upon a principle, which enjoins the necessity of removing the painful irritation of a nerve by removing its cause. Suppose, for example, we observe at the first or second irruption of the teeth, or in any other species of odontalgia, in one case a violent pain, great heat in the gums and mouth, swelled gums, flushes in the face, a hot skin, a hard pulse, great thirst and fever, &c.; in another, less pain, heat and fever, but a bad taste, foul tongue, sickness at the stomach, purging, offensive stools, &c.; every experienced physician, I should think, would have recourse in the former instance to the antiphlogistic, in the latter to the evacuating plan, and use such external and internal means as are adapted to the particular species of the disease, to the violence of the symptoms, and the age and constitution of the patient. But it is worth while to remember, that if in the latter supposed case not only cough, hoarseness, swelled tonsils, and other catarrhal symptoms make their appearance, and your patient has at the

same time slight pains in one or the other side of the chest, heat and flushes in his face, a circumscribed redness round the ossa zygomatica about the middle of the day, a harder and quicker pulse, hot hands or feet towards evening, more fever in the first part of the night, we have reason to suspect, particularly if the development of his chest did not keep pace with that of his extremities, and his habitus externus and hereditary taint be consumptive, that the gastric cause in this case is complicated with an inflammatory diathesis, and the treatment must be adapted to both. There can be no doubt that nine-tenths of pulmonary consumptions originate in neglected catarrhal affections, so common in our changeable climate, or in the stimulating and mercurial treatment which they receive. The intermittent, the hysteric and the odontalgia gravidarum, have in most cases a gastric origin, but are occasionally inflammatory, especially in high fed, stimulating, plethoric persons. Want of cleanliness, bad food and drink, little or no exercise, and foul air, cause the scorbutic species, which appears gastric in its first stage, but assumes gradually features of resolution and putrefaction. Cleanliness, vegetable food, and particularly the cochlearia, nasturtium, sinapis, &c. fresh meat, acidulated drink impregnated with carbonic acid, exercise in pure air, &c. are useful; and if confined to the gums, it will soon disappear, provided they be washed very often through the day with pure cold water, and the thin dissolved blood be pressed out of them. Mercury, and every preparation of it, is a well-known fatal poison in this species, and in my opinion ought not to be used in any, being most ruinous to the teeth. It is true, we cannot well do without it in the odontalgia venerea, if well marked; and a free use of demulcents may help some, though after all a most obstinate chronic affection, named odontalgia mercurialis, remains behind. Many physicians affirm calomel to be a certain anthelmintic; but I cannot believe it, after expelling fourteen large and live lumbrici from a young man, who had been three times salivated immediately before he came under my care. Odontalgia verminosa from lumbricis will certainly yield to strong decoctions of the root of the *Spigelia Carol.* or *Marylandica*; that from the two species of tapeworms, to large doses of *rasura stanni* and strong purgatives; and the ascari-des, and some other smaller kinds of worms, to the use of aloetics, given internally, and to clysmata oleosa. The odontalgia rheumatica or podagrica is often an acute inflammatory disease, but when chronic, and in its origin, either gastric or mixed.

Though it is manifest that the external and internal causes are various, and that the means should be adapted to the different nature of toothache, it must be conceded that the proximate cause, the effect of the operation of all the causes, consists in a local affection, an irritation of the nerve, accompanied more or less with an inflammation of the gums and of the periosteum of the tooth. If sharp, heating, stimulating substances be used, or if discutient means be neglected, the first, inflammatory stage goes over into the second, and a suppuration of the gums or of the bone of the tooth, called caries, will follow. If the mouth and gums be highly inflamed and the pain very severe, ice-cold water, or a piece of saltpetre, kept constantly in the mouth, scarification of the gums, leeches applied to the temples or behind the ears, figs boiled in milk and kept between

the cheek and gums, the vapor of hot water directed to the mouth, face, and head, and, in some plethoric persons, full bleeding, will mitigate the pain. When the inflammation is less acute, or a caries has taken its place, a pill of opium inserted in the hollow, or near it, or a small ball of cotton moistened with the tincture of cantharides applied to the gum of the painful tooth, blisters or sinapisms applied behind the ears or at more distant parts, æther or ammonia to the face, &c. are often useful, and give at least temporary relief. In very obstinate pains the nerve may be destroyed by the actual cautery, which is preferable to caustics, and the tooth, filled with gold, lead, or wax, may be preserved for many years.

There are numberless means recommended to preserve our teeth in a sound state, and to arrest their total decay after the appearance of caries in them. But the most simple, rational and successful means, to answer both these purposes, is the diligent, faithful and thorough use of plenty of pure and moderately cold water. If the mouth, gums, teeth and fauces be thus cleaned from the variety of acrid and fermenting and putrescent particles of food and other substances entering and adhering to them, every morning and evening and after every meal, and a good toothbrush be used at the same time, and this habit of cleanliness be extended generally to all the external and internal organs to which medical science obtains access, toothache will be a stranger to us. It happened about five or six years ago I was, owing to sheer carelessness and inattention, grievously afflicted with painful defective teeth, and I had once every week or two to undergo the misery of an inflamed gumboil, and the distress when the suppurated tumor was opened. A more faithful and thorough use of moderately cold water, and moving and rubbing the end of my tongue for a considerable time over the boil in the beginning of its inflammatory stage, enabled me to disperse it in every instance, and neither gumboils nor toothache trouble me since.

I cannot conclude this communication without uttering the fervent wish that a better intellectual, moral and practical education may be provided for those that study medicine, and that the knowledge of the wonderful machine in which we live be made a branch of general education. Then, and not till then, empiricism and quackery, the panaceas of Dr. Brown, of Hamilton and Thomson, will appear absurd in the eyes of every man, woman and child.

C. L. SEEGER, M.D.

Northampton, March 6, 1835.

REMARKS ON MASTURBATION.

[Communicated for the Boston Medical and Surgical Journal.]

THE pernicious and debasing practice of MASTURBATION is a more common and extensive evil with youth of both sexes, than is usually supposed. The influence of this habit upon both mind and body, severe as it has been considered, and greatly as it has been deprecated, is altogether more prejudicial than the public, and, as is believed, even the medical profession, are aware.

A great number of the evils which come upon the young at and after

the age of puberty, arise from *masturbation*, persisted in, so as to waste the vital energies and enervate the physical and mental powers of man. Not less does it sap the foundation of moral principles, and blast the first budding of manly and honorable feelings which were exhibiting themselves in the opening character of the young.

Many of the weaknesses commonly attributed to growth and the changes in the habit by the important transformation from adolescence to manhood, are justly referable to this practice.

This change requires all the energy of the system, greatly increased as it is at this period of life, which if undisturbed will bring about a vigorous and healthy condition of both the mental and physical powers.

If masturbation be commenced at this period, it cannot fail to interrupt essentially this important process ; and if continued, will inevitably impress imbecility on the constitution, not less apparent in the body than the mind, preventing, as it will not fail to do, the full development of the powers of both.

The individual becomes feeble, is unable to labor with accustomed vigor, or to apply his mind to study ; his step is tardy and weak, he is dull, irresolute, engages in his sports with less energy than usual, and avoids social intercourse ; when at rest he instinctively assumes a lolling or recumbent posture, and if at labor or at his games takes every opportunity to lie down or sit in a bent and curved position. The cause of these infirmities is *often* unknown to the subject of them, and *more generally* to the friends ; and to labor, or study, or growth, is attributed all the evils which arise from the practice of this secret vice, which if persisted in will hardly fail to result in irremediable disease or hopeless idiocy. The natural consequence of indulgence in this, as in most other vices, is an increased propensity to them. This is particularly true of masturbation. In my intercourse with this unfortunate class of individuals, I have found a large proportion of them wholly ignorant of the causes of their complaints, and if not too far gone the abandonment of the habit has, after awhile, removed all the symptoms and resulted in confirmed health.

One young man, now under my care, was first arrested in his career by reading the chapters on the subject in the *Young Man's Guide*. For many months, he has totally abstained from the practice, and yet he is feeble, depressed, irresolute, and unable to fix his attention to any subject, or to pursue any active employment. But he is steadily convalescing, and will doubtless recover.

If the symptoms above enumerated do not lead in any way to a discontinuance of the habit, other symptoms more formidable, and more difficult of cure, will present themselves. The back becomes lame and weak, the limbs tremble, the digestion is disturbed, and costiveness or diarrhoea, or an alternation of them, take place. The head becomes painful—the heart palpitates—the respiration is easily hurried—the mind is depressed and gloomy—the temper becomes irritable—the sleep disturbed, and is attended by lascivious dreams, and not unfrequently nocturnal pollutions. With these symptoms the pulse becomes small, the extremities cold and damp ; the countenance is downcast, the eye without natural lustre ; shamefacedness is apparent, as if the unfortunate victim was conscious of his degraded condition.

The stomach often rejects food, and is affected with acidity, and loathing ; the nervous system becomes highly irritable ; neuralgia, tabes dorsalis, pulmonary consumption, or fatal marasmus, terminate the suffering, or else insanity and deplorable idiocy are the fatal result. Long before such an event, the mind is enfeebled, the memory impaired, and the power of fixing the attention wholly lost. These are symptoms which should awaken our attention to the danger of the case, and which should induce us to sound the alarm, and if possible arrest the victim from the inevitable consequences of persisting in the habit.

In females, leucorrhœa is often induced by masturbation, and I doubt not incontinence of urine, strangury, prolapsus uteri, disease of the clitoris, and many other diseases, both local and general, which have been attributed to other causes.

It is often difficult to obtain information on the subject of masturbation. Where it is suspected by the physician, the friends are wholly ignorant on the subject, and the individual, suffering, is not ready to acknowledge a practice which he is conscious is filthy in the extreme, although he may have had no suspicions of its deleterious influence upon his health.

It is not sufficient that we know the consequences of masturbation, for these are often irremediable disease ; we ought to know the symptoms of its commencement, of the incipient stages of those diseases which result from it, as well as the influence which the moderate practice of it will have upon the physical and mental stamina of the man—for it is not too much to say that the practice cannot be followed by either sex, even in a moderate way, without injury, especially by the young.

Nature designs that this drain upon the system should be reserved to mature age, and even then that it be made but sparingly. Sturdy manhood, in all its vigor, loses its energy and bends under the too frequent expenditure of this important secretion ; and no age or condition will protect a man from the danger of unlimited indulgence, legally and naturally exercised.

In the young, however, its influence is much more seriously felt ; and even those who have indulged so cautiously as not to break down the health or the mind, cannot know how much their physical energy, mental vigor, or moral purity, have been affected by the indulgence.

Nothing short of total abstinence from the practice can save those who have become the victims of it. In this indulgence, no half way course will ever subdue the disease, or remove the effect of the habit from the system. Total abstinence is the only remedy. If the constitution is not fatally impaired—if organic disease has not taken place, this remedy will prove effectual, and must be adopted, especially in all cases in which the effects are visible, or the consequences cannot fail to be ultimately fatal.

This means of cure may be seconded by others, which may be found necessary to remove the effects upon the physical system. Suffice it to remark here, that total abstinence, in an aggravated form of masturbation, is not easily effected. Slight irritation will produce an expenditure of the secretion quite involuntary, and spontaneous emissions and nocturnal pollution may for a long time prolong the danger, and prevent that renovation of the powers which would otherwise be the result of the good resolution of the victim of the habit.

In a subsequent paper we may consider the influence of masturbation upon the mind, as a cause of insanity and idiocy, and suggest some remedies for the removal of its effects upon the health. W.

March, 1835.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 18, 1835.

MEDICAL CONVENTION OF OHIO.

On the 5th of January last, a large number of physicians, agreeably to invitation, met in convention at the city of Columbus. The object of the meeting was declared to be—"The regulation of professional etiquette—The construction of independent Medical Societies—The support of a periodical Journal of Practical Medicine—The erection and location of public Asylums, for the reception of Lunatics and the instruction of the Blind—The promotion of the Temperance cause—The regulation of Vaccination—The convenient supply of the Leech."

Some able reports were made, which manifest in the most favorable light, the wisdom, enterprise, humanity and intelligence of our brethren at the West. Those on the necessity for hospitals in the valley of the Mississippi—the necessity for an asylum for the education of the blind—and upon the propriety of memorializing the legislature on the subject of legalizing the dissection of human bodies, are ably and forcibly drawn, and will unquestionably eventuate in the establishment of all that has been thus proposed to the people.

As it regards a Journal of Medicine, under the sanction of the convention, Dr. Aul very wisely recommended an abandonment of the project, for the present. It is utterly useless to persuade men to become patrons against their will. There is such competition in this department of literature and science, at this day, that the patronage of medical periodicals must be left to regulate itself.

The memorial to the legislature on the subject of the erection of a State Lunatic Asylum, is an excellent common sense document, reflecting great honor on the convention, and which certainly appeals most powerfully to the heart of every man in Ohio. We make a short extract.

"Your memorialists, therefore, only deem it necessary to call your attention particularly to the fact that has been already stated (the entire unfitness of the present establishment bearing the name of Lunatic Asylum), in conjunction with the fact that there is now in your State not less than 600 to 1,000 insane persons, entirely destitute of the proper means of recovery, to ensure such legislation as the pressing importance of the subject demands.

"In a State which has already expended her millions in the construction of commercial highways and literary and benevolent institutions—in a State wealthy in her resources and proud of her wealth, a call from the unfortunate cannot be heard in vain.

"In regard to the location of the Asylum, your memorialists are of opinion that a situation more central than Cincinnati should be selected. In such a project the convenience of every part of the State should be

consulted, as all have an equal interest therein. In this view of the subject, it would seem that no place presents so many advantages as the city of Columbus, and it is believed that none would be more acceptable to the community at large."

On the whole, the profession of Ohio have done themselves much honor: while they have expressed the feelings of men, they have also convinced those at a distance, and we trust those at home, that they are members of a benevolent, energetic and liberal-minded profession, strictly devoted to the best interests of the great human family.

ANNALS OF PHRENOLOGY.

No. 4 of an interesting periodical, bearing this title, issued from the press of Marsh, Capen and Lyon of this city, has been distributed, and speaks well for the industry, at least, of the gentlemen who are interested in its management. One of the articles, denominated *Phrenological Analysis of Eloquence*, is particularly captivating; another, which we recognize as being from the pen of our young friend, Dr. Nathaniel B. Shurtleff, on the method of moulding plaster, and taking casts, must be very useful to those who are desirous of preserving phrenological peculiarities. *Cases of deficient perception of colors*, the physiologist may reflect upon, though perhaps to disadvantage without employing some of the machinery which the phrenologist invariably puts in active operation in solving all difficult problems.

The collection of skulls, casts of heads, drawings, &c. of the Boston Phrenological Society, deposited over the Boston Library in Franklin Street, has become highly valuable, and is worthy the especial notice of all scientific strangers visiting this metropolis. We are informed in this publication, that admirable busts of the celebrated Spurzheim are now procurable.

With the views we entertain of the science, we heartily recommend the *Annals* to the patronage of the profession and all others at all interested in the progress of human knowledge.

Medical College of Ohio.—There are eighty-three pay pupils and eight beneficiaries at this institution. The sparseness of students is imputed to the *cholera*. It is remarked that the State has given between thirty-five and thirty-six thousand dollars to the College, and it is intimated that the remainder of what was intended for the support of medical education might be advantageously employed in *procuring the attendance of pupils*!

Geneva, N. Y. Medical College.—In this newly created school, the following gentlemen constitute the board of faculty. Dr. Edward Cutbush, on Chemistry; Dr. Willard Parker, on Anatomy and Physiology; Dr. J. G. Morgan, on Surgery; Dr. C. B. Coventry, on Obstetrics and Materia Medica; and Dr. A. Colman, on Botany and Medical Jurisprudence. The Professor of Anatomy now holds a chair in three distinct Medical Institutions—viz. the Berkshire, in Massachusetts; the Clinical, at Woodstock, Vt.; and the Geneva Medical College.

Naval Appointments.—Robert Woodworth, William W. Valk, David Harlah, and Victor L. Gordon, have been appointed assistant surgeons

in the United States Navy. Dr. John S. Wily, recently dismissed, has been restored by the President, with the unanimous concurrence of the Senate.

Lithotomy.—January 3d, at the Westminster Hospital, a boy, six years old, was brought into the operating room. The operation was performed by Mr. Hale Thomson, the assistant surgeon, by the lateral section. Only about one ounce of blood was lost, and the time was three minutes. The stone was a cube— $12+8+6$ lines, and composed of triple phosphate laminae, laid on a supposed lithic acid nucleus. On the following Monday, however, the poor child died of asthenia. It is at this hospital that the pupils and spectators applaud or hiss the surgeon, according to their vulgar notions of his capability or ignorance—even at the moment a poor suffering human being is undergoing the dreadful tortures of an operation—as if they were in the pit of a shilling theatre, witnessing the performances of a dancing bear. For the honor of the profession, we hope such shameful proceedings will never obtain in this land of hospital decorum.

Origin of Public Dissection.—It is said that the earliest law enacted in any country for the promotion of anatomical knowledge, was one that passed in 1540. It allowed the united companies of barbers and surgeons to have yearly the bodies of four criminals for dissection.

Cæsarean Operation.—Prof. Stoltz, of Strasbourg, on the 20th of Dec. last, performed the Cæsarean operation on a female 26 years of age, whose height did not exceed 44 inches. The child was extracted alive and well; and four days after the operation, says the French Gazette, the mother was in a favorable state.

Reunion after Complete Separation.—The *Ossevatore Medico* contains a curious, and what it affirms to be a well-authenticated, case of reunion of the nose, after complete separation.

The patient, a woman of the town, had the whole of the soft part of the nose bitten off, in a quarrel, by a man. She was immediately carried before the commissary of police, when the nose was dressed. Three hours afterwards, Dr. Carlizze, who happened to come in, saw the patient, and entreated that search might be made for the lost nose. This was done, and two and a half hours afterwards the mutilated portion was found, contracted, and all covered with filth. The Doctor, however, washed the parts clean, and applied the piece, putting in a few points of suture. The dressings were not removed before the seventh day, when the witnesses observed, with great satisfaction, that complete union had taken place. In thirty-seven days the cicatrix was perfectly consolidated. The aspect of the nose, however, was most disagreeable, from the color of its tip, which presented a livid, unhealthy appearance. A solution of nitrate of silver (moderately strong) was applied to this part, and after the fall of the eschar, in five days, the nose resumed its natural color.

Providence Dispensary.—The annual meeting of the Providence, R. I. Dispensary was held on Wednesday, the 4th inst. The attending Phy-

sicians, Isaac Hartshorn, M.D. and Henry W. Thayer, M.D. presented their Annual Report. At a Managers' meeting, held subsequently, on the same day, Levi Wheaton, M.D. and Richmond Brownell, M.D. were appointed consulting Physicians—Henry W. Thayer, M.D. and Isaac Hartshorn, M.D. attending Physicians for the year ensuing; Joseph Balch, Jr. was appointed Apothecary; and Benjamin Dyer, auditor.

The number of patients admitted to the Dispensary for the year, has been 100; of which, 64 were in the Eastern, and 36 in the Western District. Of the whole number of patients, 17 were under 10 years of age; 9 between 10 and 20; 24 between 20 and 30; 22 between 30 and 40; 11 between 40 and 50; 8 between 50 and 60; and 9 over 60.

University of Pennsylvania.—There seems to be great disturbance in this once famous institution; it appears that the students have taken the care of it into their own hands, and that the trustees, in obedience to their commands, have already removed one of the professors. Where this matter will stop we cannot foretell; but from all we can learn, it is more than probable that other removals will shortly follow.

Our readers are probably aware that pistols have been resorted to and blood shed in consequence of the disputes growing out of these matters.

U. S. Medical and Surgical Journal.

ERRATUM.—On page 63, in Dr. Jeffries's lecture, for *singularity* read *similarity*.

The Communication of Dr. Delony is received.

DIED.—On the 6th inst. homeward bound, from St. Croix, W. Kissam, jr. M.D., aged 33, of New York.—At Rome, the celebrated Dr. Alexander, aged 78.—In Boston, Albert Williams, M.D. aged 33, an amiable and excellent man.

Whole number of deaths in Boston for the week ending March 14, 33. Males, 18—Females, 15.
Of lung fever, 7—dropsy on the brain, 3—apoplexy, 2—ulcers on the lungs, 1—sudden, 1—bowel complaint, 1—infantile, 3—croup, 1—debility, 1—dropsy, 2—scrofula, 1—inflammation on the lungs, 1—suicide, 1—accidental, 1—consumption, 2—liver complaint, 1—pleurisy, 1—convulsions, 1—dysentery, 1—unknown, 1. Stillborn, 3.

ADVERTISEMENTS.

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Boston, January, 1835.

(Jan. 6—1f.)

TO PHYSICIANS.

A good situation for a physician is about to be vacated in a flourishing village in Worcester County, and within a few miles of the town of Worcester. The place may be secured for a moderate consideration if applied for soon. Applications made to the editor of this Journal, post-paid, will be promptly attended to.

March 4.

An eligible country situation for a medical practitioner, in one of the eastern counties of Massachusetts, for sale. One desirous of purchasing, may obtain further information by applying at this office. Letters from applicants, post-paid, directed to the editor, will reach the advertiser without delay.

February 18.

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